FORM D SEC Mail Processing Section

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM	D
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OMB APPROVAL
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MAR 10 2008 Washington, DC

C NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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	1						

Name of Offering (check if this is an amendment and name has changed, and indicate change.)
SDJS Reg D Offering
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA * U.S. D. 4. 2. 6. 7. 9. *
1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
\$DJ\$
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
2406 Crossmill M Katy Texas 77450 281-701-7113 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)
Brief Description of Business
Nightclub & Sports Bar PROCESSE Type of Business Organization
corporation limited partnership, already formed other (please specify):
business trust limited partnership, to be formed MAR 25 2008
Month Year Actual or Estimated Date of Incorporation or Organization:
GENERAL INSTRUCTIONS
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEG) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.
Filing Fee: There is no federal filing fee.
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.
ATTENTION
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A BASIC IDENTIFICATION DATA		Section of the sectio
2. Enter the information requested for the following:		
 Each promoter of the issuer, if the issuer has been organized within the past five years; 		
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of 	of, 10% or more of	a class of equity securities of the issuer.
• Each executive officer and director of corporate issuers and of corporate general and man	aging partners of	partnership issuers; and
 Each general and managing partner of partnership issuers. 		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
LaPointe Shannan M. Business or Residence Address (Number and Street, City, State, Zip Code)		
2406 Crossmill In Katy Tx 77450		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
A		
Armitage, Robert D. Business or Residence Address (Number and Street, City, State, Zip Code)		
2406 Crossmill In. Katy Tx 77450 Speck Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)	• • •	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business of Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Obeck Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
(Use blank sheet, or copy and use additional copies of this sh	heet, as necessary)	

XXX (14)				B. Î	NFORMAT	ION ABOU	T OFFERI	NG X	7. 77 (1887) 7. 77 (1887)	HARRE	E. H	ren in
1. Has the	iggnar sol	d, or does ti	ne icones i	ntend to de	ll to non-a	coredited i	nvectore in	this offer		_	Yes	No ₩
i. Has un	. 133uct 501	u, or uoes t			n, to non-a Appendix					***************************************	أسبا	ЮØ
2. What is	s the minim	ium investn									s 80	,000
				00 000	,						Yes	No
3. Does th	he offering	permit join	t ownershi	p of a sing	le unit?					•••••		
commi If a per or state	ssion or sim son to be lises, list the n	ilar remune sted is an as:	ration for s sociated pe roker or de	solicitation erson or age caler. If me	of purchase ent of a brok ore than five	ers in conne ter or deale c (5) persoi	ection with r registered ns to be list	sales of sec I with the S ed are asso	curities in t EC and/or	irectly, any he offering. with a state sons of such		
Full Name	(Last name	first, if ind	ividual)									
Business or	Residence	Address (N	lumber and	d Street, C	ity, State, Z	Lip Code)	<u> </u>		_,, .,			
Name of As	sociated B	roker or De	aler									
States in W	hich Person	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State	s" or check	individual	States)					*************		☐ AI	l States
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full Name ((Last name	first, if ind	ividual)	,			,	· · · · · · · · · · · · · · · · · · ·			-	
Business of	r Residence	Address (I	Vumber an	d Street, C	city, State,	Zip Code)					'	-
Name of As	sociated B	roker or De	aler								Ţ	
States in W	hich Person	Listed Ha	Solicited	or Intends	to Solicit	Purchasers	<u></u>					
(Check	"All State	s" or check	individual	States)					*****************	***************************************	☐ Al	l States
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full Name	(Last name	first, if ind	ividual)	,					·· · · · · · · · · · · · · · · · · · ·			
Business of	r Residence	Address (1	Number an	d Street, C	city, State,	Zip Code)						
Name of As	sociated B	roker or De	aler				<u></u>	<u> </u>				
States in W	hich Person	Listed Ha	Solicited	or Intends	to Solicit	Purchasers		· · · · · · · · · · · · · · · · · · ·				
(Check	"All State	s" or check	indiviđual	States)	-	•••••		·····			☐ Al	l States
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE; NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggregate Offering Price			unt Already Sold
	Debt	0	\$_		0
	Equity	0	\$_		0
	Common Preferred				
	Convertible Securities (including warrants)	0	\$_		0
	Partnership Interests	0	\$_		0
	Other (Specify)	0	_ s_	(2
	Total		\$	0.0	0
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors	Number Investors	I \$	Doll of I	Aggregate ar Amount Purchases
		_			0
	Non-accredited Investors		_ 3.		
	Total (for filings under Rule 504 only)	<u>U</u>	>		Ω
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	Type of	1	Dol	lar Amount
	Type of Offering	Security		;	Sold
	Rule 505	_0	_ \$		0
	Regulation A	0	_ \$		0
	Rule 504	0	_ \$.		0
	Total	0	\$_	0.0	00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees	[_ s _		0
	Printing and Engraving Costs] s _		0
	Legal Fees] \$ _		0
	Accounting Fees		_ \$_		0
	Engineering Fees] \$_		0
	Sales Commissions (specify finders' fees separately)	•			0
	Other Expenses (identify)	_	 - \$_		0
	Total	-] s _	0.0	0

 Enter the difference between the ag and total expenses furnished in response proceeds to the issuer." 	to Part C - Question 4.a. This di	fference is the "adjusted gross			s	0
Indicate below the amount of the adjust each of the purposes shown. If the ac check the box to the left of the estimate proceeds to the issuer set forth in resp	nount for any purpose is not kno . The total of the payments listed i	wn, furnish an estimate and nust equal the adjusted gross				
) Dir	rments to Officers, rectors, & filiates		yments to Others
Salaries and fees			\$_	0	_ □ s _	0
Purchase of real estate]\$ _	0	_ s	<u> </u>
Purchase, rental or leasing and install and equipment		<u></u> \$_	D			
Construction or leasing of plant build	ings and facilities		\$	_0	□ \$_	
Acquisition of other businesses (inclusifiering that may be used in exchange	for the assets or securities of an	other				. •
issuer pursuant to a merger)		•		0	. 🗆 s _	0
Repayment of indebtedness		•		0	S	
Working capital		•			. 🗆 s _	0
Other (specify):			_] \$	0	\$_	U
			\$_	0	_ s	0_
Column Totals			- \$_0	.00		0.00
Total Payments Listed (column totals						
	D FEDERAL SI	GNATURE				
e issuer has duly caused this notice to be nature constitutes an undertaking by the information furnished by the issuer to	issuer to furnish to the U.S. Secu	rities and Exchange Commis	sion,	upon writte		
uer (Print or Type)	Signature		Date			
SDTS	Shownow	N LaPointe	2	120/0	8	
me of Signer (Print or Type)	Title of Signer (Pri					·····-

- ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification Yes No provisions of such rule?
	<u> </u>
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on For D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by t issuer to offerees.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
SOIS	Shannan M. Salointe	2-20-08
Name (Print or Type)	Title (Print or Type)	
Shannan LaPointe	Beneficial Dwner	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 3 4 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach offering price Type of investor and explanation of to non-accredited investors in State offered in state amount purchased in State waiver granted) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) Number of Number of Accredited Non-Accredited Yes Yes No State No Investors Amount **Investors** Amount ΑL ΑK ΑZ AR CA CO CT DE DC FL GA Ш ID ΠL IN IA KS ΚY LA ME MD MA MI MN MS

	6. (2. 1964年) 1961年 1	多心理植物性
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1	:	2	3		5 Disqualification				
	to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					attach attach ation of granted) Item 1)
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited		Yes	No	
МО									
MT									
NE								,	
NV									
NH									
NJ								j	
NM									
NY									
NC							·		
ND									
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	APPENDIX												
1	Intend	2 I to sell	3 Type of security and aggregate		5 Disqualification under State ULOE (if yes, attach								
	to non-accredited offering price investors in State (Part B-Item 1) (Part C-Item 1)			Type of investor and amount purchased in State (Part C-Item 2)					explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No				
WY													
PR													

